

Legislative Testimony Governor's Bill 843 AA Implementing The Governor's Budget Recommendations Concerning Social Services Human Services Committee Tuesday, March 3, 2009

Dr. Robert Schreibman, President, CT Foundation for Dental Outreach Dr. Mike Perl, Treasurer, CT Foundation for Dental Outreach

As President and Treasurer of the CT Foundation for Dental Outreach and Co-Chair of the CT Mission of Mercy, we would like to take this opportunity to register our opposition to the elimination of adult Medicaid dental care other than emergency dental services.

Having seen first hand at the inaugural CT-Mission of Mercy event in Tolland, April of 2008, at which approximately 1,200 CT citizens received over \$500,000 worth of free care (please see attached document entitled CT Mission of Mercy-Caring for One Another 2008), 97% of those seeking care were adults that traveled from 151 towns in our state, clearly pointing out the enormous need for continuous dental care for this population. We are living in an era of unprecedented change, financial instability and an even worsening health care delivery system. To continue to support a diminishment of dental services to our adult Medicaid population would truly show a lack of caring about the overall dental and medical health of our state's population. It is estimated that 1.5 million state citizens are without any dental insurance and in these turbulent economic times, this number is sure to increase.

If we allow only emergency dental care for our Medicaid adult recipients, this will put an overwhelming stress on an already weakened emergency room care system. Emergency rooms can barely keep up with the demand for services now. If our citizens are allowed to go down the unhealthy path of emergency room care only, instead of saving money, the cost of delivering emergency health care will rise dramatically. Hospitals that are already experiencing acute financial problems will be even more stressed.

The elimination of adult HUSKY dental care is a short term fix for a long term problem that if not addressed adequately will bring about a higher cost for the delivery of emergency dental care and an increased volume of those seeking care.

The Husky program has just made a monumental leap toward improving oral health care for the children enrolled in its program. To reinstate a system that was a dismal failure by asking providers to get pre-authorization for care would destroy the program and bring us back to the dark ages of state administered dental care. It would be a dereliction of duty to allow this legislation to pass.

With the above in mind, we would respectfully ask that this subcommittee not support this elimination of adult HUSKY dental care in favor of emergency care only.

Respectfully Submitted,

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